Fill in this information to identify your case:						
Debtor 1	Robbin Lynn Tracy					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY	(
Case number	19-28377					
(if known)						

■ Check if this is an amended filing

	ficial Form 106Sum		
Be a infor	mmary of Your Assets and Liabilities and Certain Statistical Information s complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendo original forms, you must fill out a new Summary and check the box at the top of this page.	r supplyir	
Part	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	353,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	47,984.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	401,284.00
Part	2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	328,058.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	13,347.00
	Your total liabilities	\$	341,405.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,496.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,577.00
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum page 1 of 2

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Debtor 1 Robbin Lynn Tracy

Case number (if known) 19-28377

the court with your other schedules.

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,460.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this informat	ion to identify your case:	
Debtor 1	Robbin Lynn Tracy	
Debtor 2 (Spouse, if filing)		
United States Ban	kruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number	19-28377	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	rm 106l	MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Employment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Billing Dept.	Superintendent of DPW
	Include part-time, seasonal, or self-employed work.	Employer's name	McGivney, Kluger & Cook, PC	Borough of Stanhope
	Occupation may include student or homemaker, if it applies.	Employer's address	Florham Park, NJ	Stanhope, NJ
		How long employed to	here? 24 years	15 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 5,916.00 \$ 8,077.00
3. +\$ 0.00 +\$ 0.00
4. \$ 5,916.00 \$ 8,077.00

For Debtor 1

For Debtor 2 or

Official Form 106l Schedule I: Your Income page 1

Debt	tor 1	Robbin Lynn Tracy	_	(Case r	number (if k	nown)	19	-28377		
	Cor	py line 4 here	4.		For \$	Debtor 1 5,91	6.00		For Debtor		
5.	Lie					,					_
5.	5a.	t all payroll deductions: Tax, Medicare, and Social Security deductions	5a	a.	\$	99	6.00	9	. 2	,119.00)
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	. •		656.00	_
	5c.	Voluntary contributions for retirement plans	50		\$		8.00	• \$;	0.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$		8.00	. \$		732.00	_
	5e.	Insurance	56	€.	\$	31	6.00	\$	1	52.00)
	5f.	Domestic support obligations	5f		\$		0.00	. \$		0.00)
	5g.	Union dues	50	g.	\$		0.00	. \$		0.00	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$	(0.00	+ \$		0.00	<u>) </u>
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,93	8.00	. \$	3	,559.00	<u>) </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,97	8.00	. \$	4	,518.00	<u>) </u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	а.	\$		0.00	\$	ı	0.00)
	8b.	Interest and dividends	8b	ο.	\$		0.00	\$		0.00)
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	c .	\$		0.00	9	i	0.00	1
	8d.		80		\$		0.00	. \$		0.00	_
	8e.	Social Security	86	€.	\$		0.00	\$	1	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$		0.00	. \$		0.00	_
	8g.	Pension or retirement income	80		\$		0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8r	Դ.+ _	\$_		0.00	+ \$		0.00	<u> </u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	_	(0.00	\$		0.0	00
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	3	3,978.00	+ \$		4,518.00	= \$	8,496.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				,	1 L			1 🗀	.,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe		•	•			n <i>Schedul</i>	'e J. +\$	0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The rest te that amount on the Summary of Schedules and Statistical Summary of Certaillies								\$Combi	8,496.00
13.	Do	you expect an increase or decrease within the year after you file this form No.	?							month	ly income
	П	Yes, Explain:									

Official Form 106l Schedule I: Your Income page 2

	n this informa	ition to identify yo	our case:					
Deb		Robbin Lynn					c if this is:	
Deb	tor 2 buse, if filing)						A supplement show	ving postpetition chapter the following date:
Unite	ed States Bankr	ruptcy Court for the	DISTRI	CT OF NEW JERSEY			MM / DD / YYYY	
	e number 19	9-28377						
		orm 106J J: Your I	Evnor) SAS		'		12/15
Be a	as complete a	and accurate as	possible eded, atta	If two married people ar ch another sheet to this				r supplying correct
Part		ribe Your House	hold					
1.	□N	o line 2. es Debtor 2 live i	•	ate household? al Form 106J-2, <i>Expense</i> s	: for Separate House	ehold of Debto	or 2.	
2.		e dependents?	□ No	, ,	•			
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Child		15	□ No ■ Yes
					Child		24	□ No ■ Yes
					Child		24	□ No ■ Yes
					Child		27	□ No ■ Yes
3.	expenses o	penses include f people other tl d your depende	han $_{m au}$	No Yes				
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your expe	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	e 4. \$		2,419.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		ıpkeep expenses dominium dues		4c. \$ 4d. \$		100.00 50.00
5.				our residence, such as ho	me equity loans	5. \$	-	0.00

ebtor 1	Robbin Lynn Tracy	Case number (if known	19-28377
. Utiliti	ies:		
6a.	Electricity, heat, natural gas	6a. \$	500.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	540.00
6d.	Other. Specify:	6d. \$	0.00
	I and housekeeping supplies	7. \$	900.00
	dcare and children's education costs	8. \$	
-		9. \$	0.00
	ning, laundry, and dry cleaning	· .	200.00
	onal care products and services	10. \$	100.00
	cal and dental expenses	11. \$	450.00
	sportation. Include gas, maintenance, bus or train fare. ot include car payments.	12. \$	200.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
	itable contributions and religious donations	14. \$	0.00
. Insur		ιτ. ψ	0.00
	of include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
	Health insurance	15b. \$	0.00
	Vehicle insurance	15c. \$	593.00
	Other insurance. Specify:	15d. \$	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.	του. ψ	0.00
Speci		16. \$	0.00
	Illment or lease payments:	·	3.00
17a.	Car payments for Vehicle 1	17a. \$	600.00
17b.	Car payments for Vehicle 2	17b. \$	725.00
17c.	Other. Specify:	17c. \$	0.00
17d.	Other. Specify:	17d. \$	0.00
	payments of alimony, maintenance, and support that you did not report		0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 10		
	r payments you make to support others who do not live with you.	\$	0.00
Speci	,	19.	
	r real property expenses not included in lines 4 or 5 of this form or on S		
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e.	Homeowner's association or condominium dues	20e. \$	0.00
. Other	r: Specify: Misc.	21. +\$	200.00
2. Calcı	ulate your monthly expenses		
	Add lines 4 through 21.	\$	7,577.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J		1,011100
			7 577 00
22C. F	Add line 22a and 22b. The result is your monthly expenses.	\$	7,577.00
	ulate your monthly net income.		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	8,496.00
23b.	Copy your monthly expenses from line 22c above.	23b\$	7,577.00
22-	Cubtract your monthly own and from		
230.	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$	919.00
	, ,		
	ou expect an increase or decrease in your expenses within the year afte kample, do you expect to finish paying for your car loan within the year or do you expect		crease or decrease because o
	ication to the terms of your mortgage?	your mongage payment to in	iorouse or deorease necause (
	·		
■ No	n		

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Fill in this inform	mation to identify your	case:		
Debtor 1	Robbin Lynn Trac	су		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	19-28377			
(if known)				■ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Di	d you pay or agree to pay someone who is NC	an attorney to help you fill out bankruptcy forms?	
	No		
	Yes. Name of person	Attach Bankruptcy Petition Preparer's No Declaration, and Signature (Official Form	
	der penalty of perjury, I declare that I have rea at they are true and correct.	the summary and schedules filed with this declaration and	
X	/s/ Robbin Lynn Tracy	X	
	Robbin Lynn Tracy Signature of Debtor 1	Signature of Debtor 2	
	Date September 7, 2022	Date	